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INSTRUCTIONS

TO

EXAMINING SURGEONS FOR PENSIONS.

1872.

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# INSTRUCTIONS

TO

## EXAMINING SURGEONS FOR PENSIONS.

DEPARTMENT OF THE INTERIOR, PENSION-OFFICE,  
Washington, D. C., 1872.

### SECTION I.

The duty of an examining surgeon, under existing laws, is to examine applicants for invalid pensions, persons claiming as invalid dependents, for restoration to the pension-rolls, and for increase of pensions; also, to examine enrolled pensioners at such stated periods as the law requires—making no examinations of the four first-named classes without special orders from this Office, and in each class using the designated blanks, to wit:

#### 1.

*Examining Surgeon's certificate in the case of an Original Applicant.*

No. of application, —.

STATE: ..... , COUNTY: ..... ,  
POST-OFFICE: ..... , 187 .

— hereby certify that — have carefully examined —, Applicant's late a —, company —, — regiment —, in the service of service. of the United States, who is an applicant for an invalid pension, by reason of an alleged disability resulting from —.

In — opinion the said — is — incapacitated for obtaining his subsistence by manual labor from the cause above stated. Degree of dis- ability.

Judging from his present condition, and from the evidence before —, Origin. it is — belief that the said disability did — originate in the service aforesaid in the line of duty.

The disability is —. Probable dura-  
A more particular description of the applicant's condition is sub- tion.  
joined:

Height, —; weight, —; complexion, —; age, —; Particular de-  
pulse, —; respiration, —.

—, —, —,  
*Examining Surgeon.*

NLM

*Examining Surgeon's certificate in the case of an applicant for Renewal of Restoration.*

No. of certificate, —.

STATE: ..... , COUNTY: ..... , POST-OFFICE: ..... , 187 .

Applicant's — hereby certify that — have carefully examined — late a —, company —, — regiment —, in the service of the United States, who is an applicant for the — of an invalid pension, by reason of alleged disability resulting from —.

Degree of disability. In — opinion the said — is — incapacitated for obtaining his subsistence by manual labor from the cause above stated.

Origin. Judging from his present condition, and from the evidence before —, it is — belief that the said disability did — originate in the service aforesaid in the line of duty.

Probable duration. The disability is —.

A more particular description of the applicant's condition is subjoined:

Particular description. Height, —; weight, —; complexion, —; age, —; pulse, —; respiration, —.

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*Examining Surgeon.*

*Examining Surgeon's certificate in the case of an applicant for Increase of Pension.*

No. of certificate, —.

STATE: ..... , COUNTY: ..... , POST-OFFICE: ..... , 187 .

It is hereby certified that —, formerly a — of Captain — company, in the — regiment of —, in the war of —, who is now paid at — agency at the rate of — dollars per month, on account, as he states, of — while in the line of duty in the military service of the United States, on or about the — day of —, 18—, at a place called —, in the State or Territory of —, is still suffering in consequence of said —.

Here specify the particular disease or injury. The disability originates entirely from the injury or disease on account of which he was originally pensioned, as follows:

Height, —; weight, —; complexion, —; age, —; respiration, —; pulse, —.

Here state fully and accurately the character of the pensioner's disability, and how he is at present affected thereby; also, state whether the disability is permanent in its present degree, and whether it has been in any degree caused or protracted by — find his disability, as described above, to be equal to, and entitling him to —.

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*Examining Surgeon.*

The Surgeon will forward his report of examination direct to the Pension-Office, whether the pensioner is thought to be entitled to increase or not.

*Surgeon's certificate of Biennial, Annual, or Semi-annual examination, on which the pensioner draws his pension.*

STATE: \_\_\_\_\_, COUNTY: \_\_\_\_\_,  
POST-OFFICE: \_\_\_\_\_, 187 .

— do hereby certify that — have carefully examined —, Pensioner's who was a — in the war —, and was granted an invalid pension service under certificate No. —, to be paid now at the agency in —, by Be particular reason of alleged disability resulting from —, which he states to give certificate No. have been received in the line of duty while he was in the military Agency where service of the United States. to be paid.

In — opinion the said pensioner's disability, from the cause aforesaid, continues.

A more particular description of the pensioner's condition is subjoined:

Height, —; weight, —; complexion, —; age, —; respiration, —; pulse, —. Particular description.

—————, Surgeon.

*Surgeon's certificate of examination in case of Dependent Relative.*

Claim No. —.

STATE: \_\_\_\_\_, COUNTY: \_\_\_\_\_,  
POST-OFFICE: \_\_\_\_\_, 187 .

I hereby certify that I have carefully examined —, who claims pension as the dependent — of —, who is alleged to have died —, and in my opinion, based on such examination and a personal acquaintance with him for — years, the said — is, and has been, physically incapacitated for the support of himself and family, the nature, degree, and duration of his disability being as follows:

Here present a full and explicit statement as to the nature of the disability, and the particular manner and degree in which it has interfered with his procuring a subsistence, from prior to the son's enlistment and death to the present date, giving his occupation and approximate age. If the facts are not within your personal knowledge, please to so state, and give your best judgment as to the probable duration and extent of the disability.

## SECTION II.

The salient points to be kept in view during these examinations are as follows :

1. What disability, if any, actually exists ?
2. If a disability exists, in what degree does it disable the applicant from subsisting by manual labor ?
3. What are the reasonable probabilities of the disability having resulted from service in the military or naval services of the United States, judging from the history given ?
4. How far do the habits of the applicant seem to affect his disability, both as regards its origin and continuance ?
5. What is the probable duration of the disability ?
6. The claimant's statements and hospital experience are not wanted in the certificate, but a description of the disability only, which should be full, precise, and clearly stated.

In all these inquiries it will be necessary to receive the applicant's statements with patience and due allowance; yet justice requires that no rate of pension shall be recommended on any mere statement of physical disqualification, unsustained by the existence of such structural changes or pathological conditions as are known to accompany the particular form of injury or disease complained of.

## SECTION III.

In estimating the degree of disability some rules may be laid down, though many injuries and diseases can only be estimated from the circumstances surrounding the specific cases.

A.—The disuse (not permanent) of a limb, or a disease equivalent thereto, will be rated at total, or eight dollars per month.

B.—The permanent disuse or loss of a limb, or a disease or wound of a permanent character equivalent thereto, will be rated at third grade, or eighteen dollars per month, the statement being made in terms that said disease or wound "*is equivalent to the loss of a hand or foot for purposes of manual labor,*" and *permanent* in that degree.

C.—The loss of both feet, or of one hand and one foot, or a permanent disability equivalent thereto, disabling from *all* manual labor entitles the subject to the rating of second grade, or twenty-four dollars per month.

D.—The loss of the sight of both eyes, of both hands, or a permanent and total disability in the latter, or a permanent and total disability rendering the claimant so helpless as to require the *constant* aid and attendance of another person, entitles him to the rating of first grade, or thirty-one dollars and twenty-five cents per month.

The following is a table of "total" pensions:

ARMY PENSIONS UNDER ACT JULY 14, 1862.

Lieutenant colonel, and higher grades.....	\$30
Major.....	25
First lieutenant .....	17
Second lieutenant .....	15
Surgeons .....	(*)
Paymasters .....	(*)
Non-commissioned officers, musicians, and privates .....	8

NAVY PENSIONS UNDER ACT JULY 14, 1862.

Captains, commanders, surgeons, (ranking as lieutenant commander, commander, or captain,) paymasters, (ranking as lieutenant commander, commander, or captain,) chief engineers, (ranking as lieutenant commander, commander, or captain,) lieutenant commanding, and master commanding .....	30
Lieutenants, surgeons, (ranking as lieutenant,) paymasters, (ranking as lieutenant,) chief engineers, (ranking as lieutenant,) passed assistant surgeons.....	25
Professors of mathematics, masters, assistant surgeons, assistant paymasters, and chaplains .....	20
First assistant engineers and pilots.....	15
Passed midshipmen, midshipmen, captain's and paymaster's clerks, second and third assistant engineers, masters' mates, gunners, boatswains, carpenters, and sail-makers, (warrant officers are all specified herein) .....	10
All petty officers and other persons not above named.....	8

F.—Officers and privates may be rated for disabilities in any degree less than "total" not below one-fourth; in the instance of a private, the rate may be stated as one-fourth, three-eighths, one-half, five-eighths, three-fourths, seven-eighths, as the case requires; and, in like manner, the rating of an officer's disability may be stated at any point from one-fourth to the full amount established by law, in accordance with the facts.

Ratings that involve fractional parts of a dollar, as one-third or two-thirds of private's total, should be avoided. None of the grades described in paragraphs B, C, and D, are subject to fractional rating.

G.—The loss of the sight of an eye is a one-half disability. The loss of an index finger or great toe is three-eighths; of a thumb, one-half; of a finger or one of the smaller toes, each one-fourth. Yet these ratings are not absolute, for a tender cicatrix would increase them. Single hernia, uncomplicated, one-half; double hernia, three-fourths; but may be rated higher in proportion to the disability produced.

The results of operations in the carpus or metacarpus, tarsus or metatarsus, will be estimated in accordance with the utility of the remaining structures for purposes of manual labor. No general rule can be

\* Pensions allowed to surgeons and paymasters, under the act of July 14, 1862, will be according to the rate provided for the rank in which they held commissions, and that rank expressed in the pension certificate and notification.

laid down. Syme's and analogous operations, if perfectly successful, should not, necessarily, leave a limb sufficiently disabled to bring it within the rating of disability prescribed by the act of June 6, 1866, and June 8, 1872; while an unsuccessful attempt may have left it fully as great a disability as would an amputation in the leg. The question of deformity must be considered from two points of view; an injury resulting in much deformity will generally disable by reason of structural change, and deformity may be in itself a bar to obtaining opportunity for subsistence by manual labor at the customary price of said labor.

H.—Certificates are forwarded direct to this office, in all cases excepting those of periodical examinations, which are sent to the Pension-Agent, for whose information and guidance they are intended, with the number of the certificate marked on the envelope, thus: "102,000," (nothing more;) and in every instance the surgeon will keep the records of his action on the blanks furnished him for that purpose, which records will thenceforth become public property in his custody.

Certificates, and all official statements, will be addressed, unpaid, as follows:

The COMMISSIONER OF PENSIONS,  
Washington, D. C.

FOR MEDICAL DIVISION.

I.—Certificates of examinations are required to be made in the handwriting of the examining surgeon, duly signed, numbered, and indorsed; and if erased or interlined, such alterations will be certified to.

K.—When an applicant alleges two or more causes of disability, each will receive attention and be rated separately. This is very necessary, from the fact that several disabilities are often stated to have risen in the service, of which legal evidence of origin therein may exist only as to one.

If a disability is found to exist, which probably originated in the service, but is not named in the order for examination, it may be described, but *must, invariably, be separately rated.*

N. B.—It may here be remarked that certificates are daily returned to surgeons for correction or completion. The following are the errors usually fallen into:

Number of claim not given.

Certificates not signed or dated.

Disabilities not rated separately.

Disabilities not rated at all.

Description of wound or disease insufficient for purposes of evidence.

The blanks not filled and indorsed.

The attention of examining surgeons is respectfully invited to the following minor points of detail, and adoption requested on the ground of convenience :

Certificates should be signed at the place indicated in the blanks, then folded in four equal folds, and the indorsements filled in.

The blank space at top of certificate is for the surgeon's address, not the claimant's. The date should accompany the address.

As certificates become part of public records, the importance of using good, durable, black ink, is obvious.

All certificates should be transmitted the day after the examination is made, and mailed in one envelope marked "Certificates."

All accounts should be sent at the last day in each month, mailed in a separate envelope and marked "Accounts." With the accounts, and in the same envelope, should be sent the orders of the Commissioner of Pensions for the examination, as without these orders the accounts can not be audited, or payment directed; they are the only vouchers needed for the accounts. Should, however, a certificate be found insufficient or unsatisfactory, it will be returned to the surgeon, and the fee for the examination will not be allowed until an acceptable certificate is furnished.

Personal explanations or particular reports and opinions should never be inclosed with other matter, but mailed in an envelope marked "Special;" this is often very necessary from the fact that communications are made by surgeons in their capacity of confidential advisers of the Office.

Requisitions for blanks should also be mailed and marked distinctly.

## SECTION IV.

### EXAMINATIONS FOR INCREASE.

L.—Certificates should state clearly in what the increased disability consists; the claimant's statement, unsupported, of increased pain is not a ground for increase. In cases where the surgeon regards the rating as too low, although no increase of the disability may have occurred, it is proper for him to give the correct rating, with his reasons therefor.

## SECTION V.

### PERIODICAL EXAMINATIONS.

M.—Biennial examinations of Army and Navy invalid pensioners are provided for by act of Congress approved March 3, 1859, on every alternate odd year, the next being due September 4, 1873. At these examinations the only question to determine is the *continuance* of the disability on account of which the claimant was originally pensioned; no other disability must be described or rated. The rating must be stated on the monthly account, Form 7, as well as on the certificate, and care be taken that the statements *correspond*. The certificate must be sent to the pension-agent at whose office the pensioner is payable, on the same day that the examination is made. If it be delayed over

twenty-four hours, the pensioner will be at liberty to submit himself to another surgeon for examination, whose certificate will be acted upon, and to whom the fee will be paid.

Periodical examinations may be required by the terms of the certificate, and will continue to be made until two biennial periods shall have passed subsequently to the date on which the certificate issued, and not, as heretofore, from date of commencement of pension. Thus, "if a pension certificate bears date prior to March 4, of a biennial (odd) year, an examination will be due upon the payment to September 4, and will take effect from the 4th of June next preceding. Annual and semi-annual examinations will govern the preceding quarterly payment, instead of the semi-annual payment."

Where annual or semi-annual examinations may have been ordered, they will cease to be made after the expiration of two biennial periods in each case.

*Every pensioner is subject to the biennial examinations, whose pension certificate does not, in express terms, exempt him therefrom.*

The examining surgeon can reduce the pension when he finds that the degree of disability is less than at the former periodical examination, but he cannot increase the pension; an increase can only be allowed after a formal application therefor by the pensioner, and the approval of an increased rate by the Commissioner.

The foregoing applies alike to Army and Navy pensions.

## SECTION VI.

### BOARDS OF EXAMINING SURGEONS.

Boards of examining surgeons have been organized in all the large cities of the Union. The number of members composing these boards is from two to five, according to the exigencies of the service.

When a board is composed of two members only, the duties of president and treasurer, or secretary and treasurer, will devolve on one person.

Unless a board of surgeons is composed of more than three members, the signature of each member will be attached to the certificates made. This rule will be invariable, excepting when waived for unavoidable causes—absence or sickness—and then the reason why the certificate is not signed by the full board will be stated on the back thereof.

The presence and signature of each examining surgeon, however, is required to insure his payment.

Boards will examine only on the first Wednesday in each month, unless otherwise specially instructed.

## SECTION VII.

### EXAMINATION OF ARTIFICIAL LIMBS.

A fee of one dollar and fifty cents will be allowed for one examination in each case of an artificial limb furnished to an invalid soldier or sailor.

The examination is to be made after the completion of the limb, and at the time of its adjustment. Examination by one member of a board is sufficient.

## SECTION VIII.

### ACCOUNTS.

I.—*Accounts for examinations of applicants for pension and increase of pension* must be rendered in duplicate, upon Form 5, at the close of each month direct to the Pension-Office, (in the same manner as the certificates,) *accompanied by the order for the examination*. If thus forwarded, accounts will be immediately examined, and one approved copy returned to the surgeon, who will sign the duplicate receipts, Form 6, and inclose the whole to the pension-agent designated therein for payment.

No accounts will be approved unless the order of the Office to the surgeon accompanies it. Names of applicants examined must be alphabetically arranged. Each account will embrace all those examined during a month, and none others.

If for "increase," add, in right-hand column, opposite the name, "For increase, certificate No. —." If "original," give company and regiment.

II.—*Accounts for periodical examinations of pensioners* will also be prepared in duplicate, Form 7, immediately after the close of each month, and forwarded simultaneously, one copy to this office, and the other accompanied by duplicate receipt, Form 8, to the pension-agent by whom the pension is payable for payment. With the check for the payment of the fee, the pension-agent will return the postage incurred in sending the certificates to the agency.

As the pension-agent has the necessary means for auditing the account only while the vouchers of the pensioner are in his possession, which by law he is required to forward to the accounting officer within ten days from the close of the month, *surgeons must render their accounts promptly at the close of each month*, else they will be returned unpaid; in which case the only relief will be by application to the Third Auditor to examine the vouchers and audit the accounts, causing delay and inconvenience to the surgeon, and trouble to the Government.

Names of pensioners must be alphabetically arranged. All those who have been examined in the month and payable at the same agency will be embraced in one account, and none others. Surnames should precede Christian names, the latter written out in full. Initial or middle letters should be carefully given.

The certificate number should be plainly given, and the rate must correspond with that set forth in the certificate, and each correctly express the estimate of the degree of pensioner's disability; an error in either is disastrous to the pensioner. Hundreds of pensioners at the biennial examinations of 1869 were subject to an unjust and unintentional reduction by the inadvertence of examining surgeons in this respect.

*Settlements.*—As periodical certificates (Form 4) are now sent by mail direct to the pension-agent, he is prepared to audit the account as soon as the certificate is received.

III.—*Accounts for special examinations of pensioners* will be rendered and paid upon Form 9, in the same manner and under the same general instructions as accounts for applicants, paragraph I. Prepare the account according to the head-note on the blank.

IV.—Fees for examinations by surgeons not holding appointments as examiners from this Office, will be collected of the claimants.

#### BLANKS.

The following is a list of blanks furnished for the use of examining surgeons:

##### Pamphlet of instructions.

1. Certificate of original or primary examination of an APPLICANT for a pension.
2. Certificate of examination for renewal or restoration of a pension under act July 14, 1862.
3. Certificate of examination for increase of a pension under act June 6, 1866.
4. Certificate of periodical examination of PENSIONERS.
- 4½. Surgeon's certificate of examination in case of dependent relative.
5. Alphabetical list or account for primary examinations of APPLICANTS, or for the increase of a pension, under any act, on a quarter-sheet.
5. (Large.) Same as preceding, on a half sheet.
6. Duplicate receipts to accompany (5) accounts.
7. Alphabetical list or account of fees for periodical examinations of pensioners, on a quarter-sheet.
7. (Medium.) Same as preceding, on a half-sheet.
7. (Large.) Same as preceding, on a full sheet.
8. Duplicate receipts to accompany (7) accounts.
9. Accounts for special examinations, with travel.
10. For civil surgeons.

A form of requisition for blanks will be furnished on application.

It is believed that if the foregoing instructions be first thoroughly understood, and then followed, no uncertainty or vexation need ever arise, and that, consequently the surgeon need never apply for advice in particular cases.

The really important part of every claim for invalid pension is the surgeon's certificate, which practically amounts to a voucher for the disbursement of the public moneys. It is, therefore, of the first importance that it be carefully and thoughtfully constructed, particular care being taken to cover all the ground indicated by the printed marginal notes

on the blanks furnished. In its construction the following points should always be borne in mind:

1. To make it full in medical or surgical detail. It is not a mere statement of diagnosis that is wanted, but a description of disease or injury, organs and structures involved, pathological lesions, structural changes, &c., and then a careful statement as to how the subject's power to perform manual labor is interfered with. In a word, such a statement in detail of the case, as upon which alone a surgeon in this Office could fix the degree of disability. By far a majority of certificates now furnished the Office are lacking in "particular description," many of the surgeons seeming to think that mere diagnosis is enough.

2. When two or more disabilities are described, each should be (separately) rated as if it were the only one existing. This comprehends only such cases as in which each disability depends upon a separate cause, and which, therefore, might be recovered from, leaving another or others. The necessity for such ratings depends upon the fact that (as stated in the body of the instructions) it not unfrequently happens that of two or more disabilities described by the surgeon, only one is alleged by the claimant.

3. When 3d grade (\$18) is recommended, the surgeon, after his "particular description," should in *every case* say "equivalent to loss of a hand or foot for purposes of manual labor." The mere recommendation of \$18 is not enough. What constitutes a disability "equivalent to loss of a hand or foot for purposes of manual labor" is a question of wide latitude, and it is desirable that the surgeon should always express his opinion *in terms*.

4. In recommending increase the reason for so recommending should *always* be stated, either that original rating was unjustly low, the disability remaining unchanged, or that there has been actual increase of disability. When the latter is given, it should be carefully stated in what the increased disability consists. In some instances in which the surgeon has never before seen the claimant it may seem difficult to estimate a change in disability; nevertheless, careful inquiry, it is believed, will in every case put the officer in possession of very desirable information in aid of decision of the claim.

5. The degree of disability should always be estimated *in dollars* in addition to the ordinary fractional statement of the "Total." This will avoid the confusion growing out of the phrase "totally incapacitated," which may mean \$31.25, \$24, or \$8, as determined by further statements.

The careful observance of the foregoing suggestions will always prevent the vexation to the surgeon and delay growing out of the return of certificates; ninety per cent., at least, of the certificates now returned daily, being deficient in one or the other of the particulars enumerated.

It will be noticed that a new class of examinations has been formally

provided for, viz, dependents. The necessary blanks have been prepared for the examination of this class, and will be issued immediately.

The certificates of examination and the *accounts* therefor should be forwarded precisely as in invalid claims.

Touching the recent requirement of the surgeons to verify the character for truth and veracity and the professional standing of physicians testifying in claims pending before the Office, it is explained that in many instances the claim turns upon the evidence of these witnesses. It is therefore important that their character and professional standing be certified to this Office. To secure this end the question is referred to the examining surgeons already known, already agents of the Office, and located as variously as the witnesses.

In inquiring as to the professional standing of such witnesses it is not intended to ask their standing in the school of medicine to which the surgeon certifying is attached, but their standing in the school to which they themselves belong. Are they recognized as reputable practitioners in their respective communities and by their *confrères* of the same school of medicine? It is known that in some instances it is difficult for the surgeon to acquire the information requisite to his certifying, but it is believed that, except in very rare instances, a little inquiry will put him in possession of all that the Office deems desirable.

Examining surgeons are recognized as confidential agents of the Office. In no instance should they communicate what they have recommended, or intend to recommend, to a claimant. All communication with the Office should be regarded as under the seal of the strictest confidence.

J. H. BAKER,  
*Commissioner.*





